

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 045404.0002

First Named Inventor Gale et al

Title

CALIXPYRROLES, CALIXPYRIDINOPYRROLES AND CALIXPYRIDINES

Express Mail Label No EJ756351041US

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, DC 20231

9998
9998

1.	<input type="checkbox"/>	'Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	
2	<input checked="" type="checkbox"/>	Applicant claims small entity status See 37 CFR 1.27.	
3.	<input checked="" type="checkbox"/>	Specification (preferred arrangement set forth below)	[Total Pages 116
		- Descriptive title of the Invention	
		- Cross References to Related Applications	
		- Statement Regarding Fed sponsored R&D	
		- Reference to sequence listing, a table, or a computer program listing appendix	
		- Background of the Invention	
		- Brief Summary of the Invention	
		- Brief Description of the Drawings (<i>if filed</i>)	
		- Detailed Description	
		- Claim(s)	
		- Abstract of the Disclosure	
4.	<input checked="" type="checkbox"/>	Drawing(s) (35 USC 113)	[Total Sheets 30
5.	<input type="checkbox"/>	Oath or Declaration	[Total Pages 9
a.	<input type="checkbox"/>	Newly Executed (original or copy)	
b.	<input checked="" type="checkbox"/>	Copy from a prior application (37 CFR §1.63(d)) (<i>for continuation/divisional with Box 18 completed</i>)	
i.	<input type="checkbox"/>	<u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §1.63(d)(2) and 1.33(b).	
6.	<input type="checkbox"/>	Application Data Sheet See 37 CFR 1.76	

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. Computer Readable Form (CRF)

b. Specification Sequence Listing on.

i. CD-ROM or CD-R (2 copies), or

ii. paper

c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & Documents(s))

10. 37 CFR §3.73(b) Statement
(when there is an assignee) Power of Attorney

11. English Translation Document *(if applicable)*

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
if foreign priority is claimed)

16. Request and Certification under 35 U S C. 122(b)(2)(B)(i)
Applicant must attach form PTO/SB/35 or its equivalent

17. Other: Please forward Notice to file missing parts
- filing date granted pursuant of 37 CFR 1.53 (f)(1)

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No:08/833,379
Prior application information: Examiner J. McKane/R. Gerstl Group / Art Unit: 1613/1626
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

Correspondence address below.

NAME	Gloria L. Norberg				
ADDRESS	Akin, Gump, Strauss, Hauer & Feld, 816 Congress Avenue, Suite 1900				
CITY	Austin	STATE	Texas	ZIP CODE	78701
COUNTRY	USA	TELEPHONE	512/499-6200	FAX	512/499-6290

Name (Print/Type)	Gloria L. Norberg	Registration No. (Attorney/Agent)	36,706
Signature		Date	April 20, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.